



State of North Carolina
Department of Environment and Natural Resources
Division of Waste Management

LAND CLEARING & INERT DEBRIS
LANDFILL
Facility Annual Report
For the period of **July 1, 2011-June 30, 2012**

According to (G.S. 130A-309.09D(b)) completed forms must be returned by August 1, 2012 and a copy of this report must be sent to the County Manager of each county from which waste was received. If you have questions or require assistance in completing this report, contact your Regional Environmental Senior Specialist.

Facility Name: Cieszko LCID Permit: 25I-LCID- ID: P1126
Facility Website (URL): None

Physical Address	Mailing Address
Street 1: <u>1090 NC Highway 101</u>	Street 1: <u>PO Box 690</u>
Street 2: _____	Street 2: <u>249 US Highway 70 West</u>
City: <u>Havelock</u> County: <u>Craven</u>	City: <u>Havelock</u>
State: <u>North Carolina</u> Zip: <u>28532</u>	State: <u>North Carolina</u> Zip: <u>28532</u>

Primary Facility Contact Person	Billing Contact Person
Name: <u>Martin G. Cieszko</u>	Name: _____
Phone: <u>(252) 447-2096</u> Fax: <u>(252) 447-0687</u>	Phone: _____ Fax: _____
Email: <u>martin@cieszkoconstruction.com</u>	Email: _____

1. Tipping Fee: \$ 75.00 per tandem truck
Tipping Fee: \$ 100.00 per tri axle truck
Tipping Fee: \$ 125.00 per quad axle or dump trailer
2. Estimate the amount of waste taken in an average week at this facility? 75 ☐ tons ☒ cubic yards
3. How many weeks did you operate this year? 50
4. What are the hours/days of operation for this facility? 07:00 to 15:30 Monday - Friday by appointment
5. What is the acreage of the footprint of the waste on site as of June 30? 5.3 Acre(s)
6. Did your facility stop receiving waste during this past Fiscal Year? ☐ Yes ☒ No
If so, please report the date this occurred: _____

REMINDER: According to (G.S. 130A-309.09D(b)), this report must be sent to the Regional Environmental Senior Specialist for your area and a copy of this report must be sent to the County Manager of each county from which waste was received.

Please return your completed report to:

Ray Williams
127 Cardinal Drive Ext.
Wilmington, NC 28405
phone: 252.948.3955 email: Ray.Williams@ncdenr.gov

CERTIFICATION: I certify that the information provided is an accurate representation of the activity at this facility.

Signature: _____

Date: 14 June 2012

Name: Martin G. Cieszko

Title: President

Phone Number: (252) 447-2096

Email: martin@cieszkoconstruction.com

Facility Name: Cieszko LCID Permit: 25I-LCID-

Address: 1090 NC Highway 101

City: Havelock State: North Carolina Zip: 28532

Person completing Assessment: Martin G. Cieszko Date: 14 June 2012

Phone Number: (252) 447-2096 Fax: (252) 447-0687 Email: martin@cieszkoconstruction.com

Instructions: Please indicate either *Yes* or *No* for each Receptor and Post Closure Maintenance question. Then please determine the distance or distances for each Receptor from the *Edge of Waste* (using range finders and/or GIS maps) and type that information into the form. Please attach additional information including GIS maps, lists of potable well locations, etc.

Receptors

1. Are there Residential Dwellings Within 1,500 feet of the Edge of Waste? ☐ Yes ☒ No
If Yes, how many? _____
What are the three closest distances from the *Edge of Waste*? _____ Feet _____ Feet _____ Feet
2. Are there Potable Wells Within 1,500 feet of the Edge of Waste? ☐ Yes ☒ No
If Yes, how many? _____
What are the three closest distances from the *Edge of Waste*? _____ Feet _____ Feet _____ Feet
3. Are there Community/Municipal Wells Within 1,500 feet of the Edge of Waste? ☐ Yes ☒ No
If Yes, how many? _____
What are the three closest distances from the *Edge of Waste*? _____ Feet _____ Feet _____ Feet
4. Are there Surface Water Bodies Within 1,500 feet of the Edge of Waste? ☒ Yes ☐ No
If Yes, how many? One
What are the three closest distances from the *Edge of Waste*? 1005 Feet 1050 Feet 1650 Feet
Please list the names of the water bodies: Hancock Creek
5. Is Public Water Available Within 1,500 feet of the Edge of Waste? ☐ Yes ☒ No
If Yes, how many of the Residential Dwellings noted above are connected? _____

Corrective Measures

6. Is there an active methane extraction system (blower, flare, etc.)? ☐ Yes ☒ No
7. Is there a passive methane extraction system (trench, vents in cap, flare, etc.)? ☐ Yes ☒ No
8. Is there groundwater remediation taking place on site? ☐ Yes ☒ No
If Yes, what is the specific remedial technology used? _____

Comments